ANNA JOHN NURSING HOME

W846	COUNTY	ROAD	EE,	PO	BOX	365	

	,				
ONEIDA	54155	Phone: (920) 869-2797		Ownership:	Tribal Government
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Con	junction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31/05):	48	Title 18 (Medicare) Certified?	No
Total Licensed	Bed Capacity	(12/31/05):	48	Title 19 (Medicaid) Certified?	Yes
Number of Resid	dents on $12/31$	/05:	2.7	Average Daily Census:	2.7

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)						
Primary Diagnosis	*	Age Groups	*	Less Than 1 Year	29.6		
				1 - 4 Years	37.0		
Developmental Disabilities	0.0	Under 65	11.1	More Than 4 Years	33.3		
Mental Illness (Org./Psy)	18.5	65 - 74	11.1				
Mental Illness (Other)	0.0	75 – 84	29.6		100.0		
Alcohol & Other Drug Abuse	0.0	85 - 94	37.0				
Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.1	Full-Time Equivalent			
Cancer	0.0			Nursing Staff per 100 Resid	lents		
Fractures	0.0		100.0	(12/31/05)			
Cardiovascular	18.5	65 & Over	88.9				
Cerebrovascular	11.1			RNs	14.8		
Diabetes	11.1	Gender	8	LPNs	17.6		
Respiratory	7.4			Nursing Assistants,			
Other Medical Conditions	33.3	Male	25.9	Aides, & Orderlies	44.8		
		Female	74.1				
	100.0						
			100.0				

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other		Ī	Private Pay	2		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	5	22.7	171	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	18.5
Skilled Care	0	0.0	0	16	72.7	146	0	0.0	0	4	80.0	136	0	0.0	0	0	0.0	0	20	74.1
Intermediate				1	4.5	121	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	3.7
Limited Care				0	0.0	0	0	0.0	0	1	20.0	136	0	0.0	0	0	0.0	0	1	3.7
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		22	100.0		0	0.0		5	100.0		0	0.0		0	0.0		27	100.0

ANNA JOHN NURSING HOME

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services	, and Activities as of $12/3$	31/05
Deaths During Reporting Period					 % Needing		Total
			•		_	0	
Percent Admissions from:		Activities of	8		sistance of		Number of
Private Home/No Home Health	5.3	Daily Living (ADL)	Independent	One	Or Two Staff	±	Residents
Private Home/With Home Health	31.6	Bathing	3.7		70.4	25.9	27
Other Nursing Homes	10.5	Dressing	14.8		59.3	25.9	27
Acute Care Hospitals	42.1	Transferring	44.4		14.8	40.7	27
Psych. HospMR/DD Facilities	0.0	Toilet Use	14.8		44.4	40.7	27
Rehabilitation Hospitals	0.0	Eating	81.5		7.4	11.1	27
Other Locations	0.0	*******	******	*****	******	*******	******
Total Number of Admissions	19	Continence		%	Special Trea	tments	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	3.7	Receiving :	Respiratory Care	3.7
Private Home/No Home Health	23.8	Occ/Freq. Incontinen	t of Bladder	70.4	Receiving '	Tracheostomy Care	0.0
Private Home/With Home Health	28.6	Occ/Freq. Incontinen	t of Bowel	44.4	Receiving	Suctioning	0.0
Other Nursing Homes	0.0				Receiving	Ostomy Care	3.7
Acute Care Hospitals	23.8	Mobility			Receiving	Tube Feeding	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	3.7	Receiving	Mechanically Altered Diets	33.3
Rehabilitation Hospitals	0.0	į				_	
Other Locations	0.0	Skin Care			Other Reside	nt Characteristics	
Deaths	23.8	With Pressure Sores		0.0	Have Advan	ce Directives	100.0
Total Number of Discharges		With Rashes		0.0	Medications		
(Including Deaths)	21	İ			Receiving	Psychoactive Drugs	48.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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		Ownership:			Size:	Lic	ensure:		
	This	Gove	ernment	Und	er 50	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	8	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	56.3	91.9	0.61	84.3	0.67	88.8	0.63	88.1	0.64
Current Residents from In-County	37.0	84.8	0.44	76.3	0.49	83.2	0.45	77.6	0.48
Admissions from In-County, Still Residing	5.3	27.4	0.19	27.2	0.19	18.7	0.28	18.1	0.29
Admissions/Average Daily Census	70.4	87.7	0.80	109.2	0.64	177.7	0.40	162.3	0.43
Discharges/Average Daily Census	77.8	91.8	0.85	108.6	0.72	179.2	0.43	165.1	0.47
Discharges To Private Residence/Average Daily Census	40.7	36.0	1.13	40.1	1.02	83.4	0.49	74.8	0.54
Residents Receiving Skilled Care	92.6	91.9	1.01	96.7	0.96	96.3	0.96	92.1	1.01
Residents Aged 65 and Older	88.9	83.3	1.07	97.3	0.91	91.3	0.97	88.4	1.01
Title 19 (Medicaid) Funded Residents	81.5	72.9	1.12	58.1	1.40	61.8	1.32	65.3	1.25
Private Pay Funded Residents	18.5	18.0	1.03	35.3	0.52	22.5	0.82	20.2	0.92
Developmentally Disabled Residents	0.0	2.7	0.00	0.9	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	18.5	53.7	0.34	37.1	0.50	34.8	0.53	32.9	0.56
General Medical Service Residents	33.3	17.9	1.87	14.1	2.37	23.0	1.45	22.8	1.46
Impaired ADL (Mean)	48.9	48.8	1.00	50.4	0.97	48.4	1.01	49.2	0.99
Psychological Problems	48.1	63.4	0.76	53.0	0.91	59.5	0.81	58.5	0.82
Nursing Care Required (Mean)	5.1	8.0	0.64	7.2	0.71	7.2	0.71	7.4	0.69